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Attorney Docket Number D597.4 **DECLARATION FOR UTILITY OR** First Named Inventor Kingsley **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date □ Declaration ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) OR Group Art Unit Submitted with Initial Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:					
My residence, mailing address, an	d citizenship are as stat	ed below next to my nar	me.		
I believe I am the original, first and names are listed below) of the sub	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
High-Impedance Optical	High-Impedance Optical Electrode				
the specification of which	(7	itle of the Invention)			
☑ is attached hereto					
OR		as United S	States Application N	Number or PCT International	
☐ was filed on (MM/DD/YYYY)			••	(if applicable)	
Application Number	and was a	mended on (MM/DD/YY	YY) [(if applicable).	
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ide	ntified specification	n, including the daims, as	
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Dat (MM/DD/YYYY)		Certified Copy Attached? YES NO	
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)	Filing Dat	e (MM/DD/YYYY)	Addition	al province application	
60/215918	07/03/2	07/03/2000		al provisional application are listed on a ental priority data sheet /02B attached hereto.	
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[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application Customer Number Direct all correspondence to: OR X Correspondence address below or Bar Code Label Name Philip J. Pollick Address P.O. Box 141510 Address OH City Columbus ZIP 43214-6510 State United States of America Country Telephone 614 263 8990 Fax 614 263 2110 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. ☐ A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Given Name **Family Name** or Surname Kingsley (first and middle [if any]) Stuart A inventor's Signature Residence: City Bexley State OH Country US Citizenship Mailing Address 545 Northview Drive **Mailing Address** City Bexley State OH 43209 Country ☐ A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Given Name **Family Name** Sriram (first and middle [if any]) Sriram S. or Surname July 3, 2001 inventor's Signature State OH Country US Residence: City Powell Citizenship US Mailing Address 664 Petworth Court **Mailing Address** ZIP 43065 City Powell State OH Country US

Additional inventors are being named on the _1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if ar	ıy:			A petition	has been filed	for th	is unsigned inventor
Given Name (first and middle [if any])				Family Name	or St	ırname
Anthony A.			Во	iarski			
Inventor's Additional Signature	hi						7-3-0/ Date
Residence: City Columbus	State	ОН		Country	US		Citizenship US
Mailing Address 2615 Henthorne Road							
Mailing Address							
City Columbus	State	ОН		ZIP 43	221 c	ountr	y_US
Name of Additional Joint Inventor, if ar	ıy:			A petition	has been filed	for this	s unsigned inventor
Given Name (first and middle [if any])				Family Name	or S	urname
Norman				Gantz			
Inventor's Signature	I						Date 7-3-0/
Residence: City Columbus	State	ОН		Country	US	-	Citizenship US
Mailing Address 435 Norwich Avenue, A	Apt. 4						
Mailing Address							
city Columbus	State		ЭН	ZIP	43201	Cour	ntry US
Name of Additional Joint Inventor, if a	ny:			A petition h	as been filed fo	or this	unsigned inventor
Given Name (first and middle [if any])				Family N	ame c	or Surname
Inventor's Signature				, <u> </u>			Date
Residence: City	State			Country			Citizenship
Mailing Address							
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Application Number	
Filing Date	
First Named Inventor	Kingsley
Group Art Unit	
Examiner Name	
Attorney Docket Number	D597.4

I hereby appoir	nt:			
OR	ers at Customer Number er(s) named below:	000027734		Place Customer Number Bar Code Label here
[X] Fractitione	Name		Pagis	stration Number
Jasor	n Foster		39,981	stration (vulnbe)
Frank	k H. Foster		24,560	
Frank	T. Krembias		22,773	
Patrio	ck P. Phillips	· · · · · · · · · · · · · · · · · · ·	29,690	
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	/Inventor. of record of the entire inter			
	SIGNATURE of	Applicant or Assign	ee of Record	
Nome	Stuart A. Kingsley			'
Name	Start Kingsley	- %		
Signature Date		900/		
	200		or their represer	ntative(s) are required. Submit multiple
forms if more than one s	ignature is required, see below*.			, , , , , , , , , , , , , , , , , , ,
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Application Number	
Filing Date	
First Named Inventor	Kingsley
Group Art Unit	
Examiner Name	
Attomey Docket Number	D597.4

l hereby appo	int:	
X Practition	ners at Customer Number 000027734	Place Customer Number Bar Code
OR	-	Label here
X Practition	ner(s) named below:	
	Name	Registration Number
Jaso	on Foster	39,981
 	nk H. Foster	24,560
ļ	nk T. Kremblas	22,773
Patri	ick P. Phillips	29,690
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	the correspondence address for the above-identif -mentioned Customer Number.	ried application to:
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	e of record of the entire interest. See 37 CFR 3.7 ent under 37 CFR 3.73(b) is enclosed. (Form PTC	
	SIGNATURE of Applicant or Assigned	e of Record
Name	Sriram S. Sriram	
Signature	h D.h	
Date	Juh 3, 2001	
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Application Number	
Filing Date	
First Named Inventor	Kingsley
Group Art Unit	
Examiner Name	
Attorney Docket Number	D597.4

Practitioners at Customer Number 000027734	I hereby appoi	nt:							
Practitioner(s) named below: Name	X Practitioners at Customer Number 000027734						- 1		
Name Registration Number Jason Foster 39,981 Frank H. Foster 24,560 Frank T. Kremblas 22,773 Patrick P. Phillips 29,690 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Anthony A. Boiarski Signature Anthony A. Boiarski	OR			<u> </u>					
Jason Foster Frank H. Foster Prank T. Kremblas 22,773 Patrick P. Phillips 29,690 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address Address Address I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Anthony A. Boiarski Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	X Practition	er(s) named	below:						
Frank H. Foster 24,560 Frank T. Kremblas 22,773 Patrick P. Phillips 29,690 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Anthony A. Boiarski Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			Name						
Frank T. Kremblas 22,773 Patrick P. Phillips 29,690 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Anthony A. Bolarski Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Jasoi	n Foster			39,98	39,981			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Anthony A. Bolarski Signature Date Date DOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	 _					 			
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Date 7-3-0/ NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Anthony A.	Boiarski						
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Application Number	
Filing Date	
First Named Inventor	Kingsley
Group Art Unit	
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Attorney Docket Number	D597.4

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		SIGNATURE of	Applicant or Assign	ee of i	Record			
								
Name	Norma	Norman Gantz						
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
☑ *Total of 4	fo	rms are submitted.						